



Clover Health Sexually Transmitted Infection Testing Reimbursement Policy

Policy # RP-074

Policy Title	Sexually Transmitted Infection Testing Reimbursement Policy
Policy Department	Payment Strategy Operations
Effective Date	10/1/2022
Revision Date(s)	
Next Review Date	

Disclaimer:

Clover Health applies CMS criteria and guidelines, National Coverage Determinations (NCD), Local Coverage Determinations (LCD), Clover Policies, and MCG for determining medical necessity. Clover Policies are intended to provide a standard guideline but are not used to preempt providers judgement in rendering services. Providers are expected to provide care based on best practices and use their medical judgement for appropriate care.

Description:

Clover Health has created this policy to outline the reimbursement and frequency requirements related to testing for Sexually Transmitted Infections (STIs) and High Intensity Behavioral Counseling (HIBC).

Definitions:

- Sexually Transmitted Infections (STIs)
 - An infection transmitted through sexual contact, caused by bacteria, viruses, or parasites.
- High Intensity Behavioral Counseling (HIBC)
 - a program intended to promote sexual risk reduction or risk avoidance, which includes each of these broad topics, allowing flexibility for appropriate patient-focused elements: education, skills training, guidance on how to change sexual behavior.



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Policy:

Clover Health follows the CMS National Coverage Determination (NCD) 210.10, for screening of Sexually Transmitted Infections (STIs) and High-Intensity Behavioral Counseling (HIBC) to prevent STIs. Clover covers STI screenings for chlamydia, gonorrhea, syphilis, and/or Hepatitis B if a member is pregnant or at increased risk for an STI.

To be considered an increased risk for an STI, one of the following should be documented and coded in the member medical record:

- Multiple sex partners
- Using barrier protection inconsistently
- Having sex under the influence of alcohol or drugs
- Having sex in exchange for money or drugs
- Age (24 years of age or younger and sexually active for women for chlamydia and gonorrhea)
- Having an STI within the past year
- IV drug use (for hepatitis B only)
- In addition for men – men having sex with men (MSM) and engaged in high risk sexual behavior, but no regard to age

There are multiple tests that can be covered, with varying requirements in order for testing to be covered. STI screenings are considered to be preventive services, and the below are covered by Clover Health:

- Screening for chlamydial infection for all sexually active non-pregnant young women aged 24 and younger and for older non-pregnant women who are at increased risk,
- Screening for chlamydial infection for all pregnant women aged 24 and younger and for older pregnant women who are at increased risk,
- Screening for gonorrhea infection in all sexually active women, including those who are pregnant, if they are at increased risk,
- Screening for syphilis infection for all pregnant women and for all persons at increased risk,
- Screening for hepatitis B virus (HBV) infection in pregnant women at their first prenatal visit,
- HIBC for the prevention of STIs for all sexually active adolescents, and for adults at increased risk for STIs.

Screening for chlamydia and gonorrhea:



- Pregnant women who are 24 years old or younger when the diagnosis of pregnancy is known, and then repeat screening during the third trimester if high-risk sexual behavior has occurred since the initial screening test.
- Pregnant women who are at increased risk for STIs when the diagnosis of pregnancy is known, and then repeat screening during the third trimester if high-risk sexual behavior has occurred since the initial screening test.
- Women at increased risk for STIs annually.

Screening for syphilis:

- Pregnant women when the diagnosis of pregnancy is known, and then repeat screening during the third trimester and at delivery if high-risk sexual behavior has occurred since the previous screening test.
- Men and women at increased risk for STIs annually.

Screening for hepatitis B:

- Pregnant women at the first prenatal visit when the diagnosis of pregnancy is known, and then rescreening at time of delivery for those with new or continuing risk factors.

Additionally, Clover covers up to two individual 20- to 30-minute, face-to-face counseling sessions annually to members for HIBC to prevent STIs, for all sexually active adolescents, and for adults at increased risk for STIs, if referred for this service by a primary care physician or practitioner, and provided by a Medicare eligible primary care provider in a primary care setting.

High/increased risk sexual behavior for STIs is determined by the primary care provider by assessing the patient’s sexual history which is part of any complete medical history, typically part of an annual wellness visit or prenatal visit and considered in the development of a comprehensive prevention plan. The medical record should be a reflection of the service provided.

<u>Claim Codes (if applicable)</u>	<ul style="list-style-type: none"> • 86592 <ul style="list-style-type: none"> ○ Syphilis test, non-treponemal antibody; qualitative (e.g., VDRL, RPR, ART) • 86593 <ul style="list-style-type: none"> ○ Syphilis test, non-treponemal antibody; quantitative • 86631 <ul style="list-style-type: none"> ○ Antibody; Chlamydia 86632 Antibody; Chlamydia, IgM
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	<ul style="list-style-type: none">● 86632<ul style="list-style-type: none">○ Antibody; Chlamydia, IgM● 86704<ul style="list-style-type: none">○ Hepatitis B core antibody (HBcAb); total● 86706<ul style="list-style-type: none">○ Hepatitis B surface antibody (HBsAb)● 86780<ul style="list-style-type: none">○ Antibody; Treponema pallidum● 87110<ul style="list-style-type: none">○ Culture, chlamydia, any source● 87270<ul style="list-style-type: none">○ Infectious agent antigen detection by immunofluorescent technique; Chlamydia trachomatis● 87320<ul style="list-style-type: none">○ Infectious agent antigen detection by enzyme immunoassay technique, qualitative or semiquantitative, multiple-step method; Chlamydia trachomatis● 87340<ul style="list-style-type: none">○ Infectious agent antigen detection by Immunoassay technique, (eg, enzyme immunoassay [EIA], enzyme-linked immunosorbent assay [ELISA], fluorescence immunoassay [FIA], immunochemiluminometric assay [IMCA]) qualitative or semiquantitative; hepatitis B surface antigen (HBsAg)● 87341<ul style="list-style-type: none">○ Infectious agent antigen detection by immunoassay technique, (eg, enzyme immunoassay [EIA], enzyme-linked immunosorbent assay [ELISA], fluorescence immunoassay [FIA], immunochemiluminometric assay [IMCA]) qualitative or semiquantitative; hepatitis B surface antigen (HBsAg) neutralization○● 87490<ul style="list-style-type: none">○ Infectious agent detection by nucleic acid (DNA or RNA); Chlamydia trachomatis, direct
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	<p>probe technique</p> <ul style="list-style-type: none">● 87491<ul style="list-style-type: none">○ Infectious agent detection by nucleic acid (DNA or RNA); Chlamydia trachomatis, amplified probe technique● 87590<ul style="list-style-type: none">○ Infectious agent detection by nucleic acid (DNA or RNA); Neisseria gonorrhoeae, direct probe technique● 87591<ul style="list-style-type: none">○ Infectious agent detection by nucleic acid (DNA or RNA); Neisseria gonorrhoeae, amplified probe technique● 87800<ul style="list-style-type: none">○ Infectious agent detection by nucleic acid (DNA or RNA), multiple organisms; direct probe(s) technique (Use when performing combined chlamydia and gonorrhea testing)● 87810<ul style="list-style-type: none">○ Infectious agent antigen detection by immunoassay with direct optical observation; Chlamydia trachomatis● 87850<ul style="list-style-type: none">○ Infectious agent antigen detection by immunoassay with direct optical observation; Neisseria gonorrhea● G0445<ul style="list-style-type: none">○ Semiannual high intensity behavioral counseling to prevent STIs, individual, face-to-face, includes education skills training & guidance on how to change sexual behavior● G0449<ul style="list-style-type: none">○ HBV screening for asymptomatic, non-pregnant adolescents and adults at high risk.
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References



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[NCD 210.10](#)

[Medicare Claims Processing Manual Chapter 18](#)

<https://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/Downloads/R141NCD.pdf>